2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # M54454

1. Entity Name
GULF SOUTH FOREST PRODUCTS, INC.

Principal Place of Business	Mailing Address
3038 N. FEDERAL HIGHWAY BUILDING L FORT LAUDERDALE, FL 33306 US	P.O. BOX 39299 FORT LAUDERDALE, FL 33339 US

DO NOT WRITE IN THIS SPACE

01262006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0002925
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

YOHANAN, SAM
3038 NORTH FEDERAL HIGHWAY
BUILDING L
FORT LAUDERDALE, FL 33306

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000426858
02/20/06-80059-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	DCT
NAME	YOHANAN, SAM
STREET ADDRESS	3038 N FED HWY BLDG L
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	DPS
NAME	YOHANAN, JOHN
STREET ADDRESS	3038 N FEDERAL HWY BLDG L
CITY-ST-ZIP	FORT LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. *I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with the other like empowered.*

SIGNATURE: _____ 2/6/06 954-565-83[illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #